Fill in this information to identify the case:	
Deblor 1 DENNIS M DANZIK	The second secon
Debtor 2 (Spouse, if filing)	CONTRACTOR OF THE PROPERTY OF
United States Bankruptcy Court for the:	District of WYOMING (State)
Case number 17-20934	,

Official Form 410

Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill In all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

. Who is the current creditor?	Department of the Treasury - Internal Revenue Service Name of the current creditor (the person or entity to be paid for this claim)						
	Other names the creditor used with the debtor						
. Has this claim been acquired from someone else?	No (Yes. From whom?						
. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?	Where should different)	Where should payments to the creditor be sent? (if different)				
Creditor be sent	Internal Revenue Service	Internal Revenu	e Service				
Federal Rule of	Name	Name					
Bankruptcy Procedure (FRBP) 2002(g)	P.O. Box 7346	1900 Broadway	1999 Broadway M/S 5012DEN				
(/ Hair) 2002(g)	Number Street	Number	Street				
		, , , , , , , , , , , , , , , , , , , ,					
	Philadelphia PA 19101-7346	Denver	co	80202-3025			
	City State ZIP Code	City	State	ZIP Code			
	Contact phone 1-800-973-0424	Contact phone	(303) 603-4746	-			
	Contact email	Contact email					
	Creditor Number: 1167244						
	Uniform claim identifier for electronic payments in chapt	er 13 (if you use one)					
Does this claim amend	Ľ. No						
one already filed?	Yes. Claim number on court claims registry	(if known)	3 Filed	on: 12/18/2017 MM /DD /YYYY			
Do you know if anyone	■ No						
else has filed a proof of claim for this claim?	Yes. Who made the earlier filing?						



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i. Do you have any number you use to identify the debtor?	No ■ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: See Attachment
. How much is the claim?	\$ 2,336,536,44 Does this amount include interest or other charges?
	Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
. What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
· ·	Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c),
	Limit disclosing information that is entitled to privacy, such as health care information.
	Taxes
. Is all or part of the claim secured?	© No
secureu:	■ Yes. The claim is secured by a lien on property.
	Nature of property:
	Real Estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim.
	■ Motor Vehicle
	 Other. Describe: "All of debtor(s) right, title and interest to property - 26 U.S.C. §6321.
	Basis for perfection: See Attachment Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
	Value of Property:
	Amount of the claim that is secured: \$ 637,409.81
	Amount of the claim that is unsecured: \$1,699,126.63 (The sum of the secured and unsecured amounts should match the amount in line 7
	Amount necessary to cure any default as of the date of the petition:
	Annual Interest Rate (when case was filed) 4 %
	□ Fixed ■ Variable
. Is this claim based on a lease?	■ No Yes. Amount necessary to cure any default as of the date of the petition. \$
. Is this claim subject to a right of setoff?	○ No ■ Yes. Identify the property See Attachment

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Is all or part of the claim entitled to priority under		Check all that apply:					
11 U.S.C. §507(a)?	, , ,		Amount entitled to priorit				
A claim may be partly priority and partly		mestic support obligations (including alimony and child support) under U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$				
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	⊂ Up pe	s for					
	bar	ages, salaries, or commissions (up to \$12,850*) earned within 180 days before nkruptcy petition is filed or the debtor's business ends, whichever is earlier. U.S.C. § 507(a)(4).	e the \$				
	■ Ta	ixes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ 56,325.31				
	□ Co	ontributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$				
	□ Ot	ther, Specify subsection of 11 U.S.C. § 507(a)() that applies.	\$				
	*Amo	ounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun o	on or after the date of adjustment.				
Cin- Balan			Company Commence of the Commen				
Part 3: Sign Below The person completing this	Check the	appropriate box:					
proof of claim must sign	■ I am the	•••					
and date it. FRBP 9011(b).	☐ I am the creditor's attorney or authorized agent.						
f you file this claim	I am the trustee, or the debtor, or their authorized agent, Bankruptcy Rule 3004.						
electronically FRBP	lam a gu	uarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.					
specifying what a signature	I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.						
raudulent claim could be	I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.						
rears, or both.	I declare under penalty of perjury that the foregoing is true and correct.						
8 U.S.C. §§ 152, 157, and 571. E	Executed on date 07/26/2018 MM / 00 / YYYY						
	/s/ ROCHE (Signature)	A ROMERO					
F	Print the n	ame of the person who is completing and signing this claim:					
•	Name	ROCHEA First name Middle name	ROMERO Last name				
	l'itle	Acting Insolvency Manager					
T							
	Company	Internal Revenue Service identify the corporate servicer as the company if the authorized agent is a servicer.					
C	Company Address						

Proof of Claim for Internal Revenue Taxes

Department of the Treasury/Internal Revenue Service

In the Matter of: DENNIS M DANZIK 1108 14TH ST

PARK COUNTY CODY, WY 82414



Form 410 Attachment

Case Number 17-20934

Type of Bankruptcy Case

CHAPTER 11

Date of Petition 12/06/2017

Amendment No. 4 to Proof of Claim dated 12/15/2017.

The United States has not identified a right of setoff or counterclaim. However, this determination is based on available data and is not intended to waive any right to setoff against this claim debts owed to this debtor by this or any other federal agency. All rights of setoff are preserved and will be asserted to the extent lawful.

11 USC 523(a)(1)&(7) GENERAL UNSECURED CLAIMS MAY BE NON-DISCHARGEABLE

Taxpaver		Tax	Date Tax		Penalty to	Interest to	Notice of Ta	x Lien Filed:
D Number	Kind of Tax	Period	Assessed	Тах Дие	Petition Date	Petition Date	Date	Office Location
XX-XX-1786	INCOME	12/31/2006	11/09/2009	\$1,660.27	\$4,177.80	\$2,634.85	09/06/2017	PARK
							03/17/2015	CLARK COUNT
XX-XX-1786	INCOME	12/31/2007	08/08/2011	\$44,809.00	\$30,142.10	\$18,927.24	09/06/2017	PARK
							03/17/2015	CLARK COUNT
XX-XX-1786	INCOME	12/31/2014	06/13/2016	\$353,735.00	\$139,716.69	\$35,696.11	09/06/2017	PARK
XX-XX-1786	INCOME	12/31/2015	06/20/2016	\$5,077.00	\$489.14	\$344.61	09/06/2017	PARK
				\$405,281.27	\$174,525,73	\$57,602.81		

Total Amount of Secured Claims:

\$637,409.81

Unsecured P	riority Claims	under section 507(a)(8) of the	Bankru	ptcy Code		
Taxpayer 1D Number	Kind of Tax	Tax Period		Date Tax Assessed	Tax Due	Interest to Petition Date
XXX-XX-1786	INCOME	12/31/2015	1	Pending Examination	\$45,263.00	\$5,592.40
XXX-XX-1786	INCOME	12/31/2016	2	Unassessed-No Return	\$5,330.85	\$139.06
					\$50,593.85	\$5,731.46

Total Amount of Unsecured Priority Claims:

\$56,325.31

Unsecured G	eneral Claims				
Taxpayer ID Number	Kind of Tax	Tax Period	Date Tax Assessed	Tax Due	Interest to Petition Date
XXX-XX-1786	INCOME	12/31/2010	07/16/2018	\$87,502.00	\$26,475.35
XXX-XX-1786	INCOME	12/31/2011	07/23/2018	\$147,968.00	\$37,070.52
XXX-XX-1786	INCOME	12/31/2012	07/23/2018	\$391,185.00	\$80,978.22

I PROPOSED TAX DEFICIENCY DETERMINED BY EXAMINATION OF DEBTOR(S) TAX RETURN.

² UMASSESSED TAX LIABILITYIES) HAYE REEN LISTED ON THIS CLAIM BECAUSE OUR RIBCORDS SHOW NO RETURNS) FILED. WHEN THE DEBTURES FILES THIS RETURN OR PROVIDES OTHER INFORMATION AS REQUIRED BY LAW THE CLAIM WILL BE AMERICED.

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Case 17-20934 Claim 3-4 PRed 07/2008 5 09/2 Main Document Page 5 of 7

Proof of Claim for Internal Revenue Taxes



Form 410 Attachment

Department of the Treasury/Internal Revenue Service

In the Matter of: DENNIS M DANZIK 1108 14TH ST PARK COUNTY CODY, WY 82414 Case Number 17-20934

Type of Bankruptcy Case

CHAPTER 11

Date of Petition 12/06/2017

\$370,219.00

\$996,874.00

•

XXX-XX-1786

INCOME

Amendment No. 4 to Proof of Claim dated 12/15/2017.

Unsecured General Claims (Continued from Page 1)

Taxpayer
ID Number Kind of Tax Tax Period Date Tax Assessed Tax Due Petition Date

07/23/2018

Penalty to date of petition on unsecured priority claims (including interest thereon) \$9.052.60 Penalty to date of petition on unsecured general claims (including interest thereon) \$431,380.38

12/31/2013

Total Amount of Unsecured General Claims:

\$1,642,801.32

\$60,970.25

\$205,494.34

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INTERNAL REVENUE SERVICE
FACSIMILE FEDERAL TAX LIEN DOCUMENT
BANKRUPTCY DOCKET: 17-20934

Area: SMALL BUSINESS/SELF EMPLOYED #6
Lien Unit Phone: (800) 913-6050

Lien Recorded: 09/06/2017 - 00:00AM
Recording Number: 2017-4476
UCC Number:
Liber :
Page :

IRS Serial Number: 276377617

This Lien Has Been Filed in Accordance with Internal Revenue Regulation 301.6323(f)-1.

Name of Taxpayer: DENNIS M DANZIK

Residence:

1108 14TH STREET CODY, WY 82414

With respect to each assessment below, unless notice of lien is refiled by the date in column(e), this notice shall constitute the certificate of release of lien as defined in IRC 6325(a).

Form	Period	ID Number	Assessed	Refile Deadline	Unpaid Balance
(a)	(b)	(c)	(d)	(e)	(f)
1040	12/31/2006	XXX-XX-1786	11/09/2009	12/09/2019	\$5,754.14
1040	12/31/2007	XXX-XX-1786	08/08/2011	09/07/2021	\$74,404.54
1040	12/31/2014	XXX-XX-1786	06/13/2016	07/13/2026	\$471,889.42
1040	12/31/2015	XXX-XX-1786	06/20/2016	07/20/2026	\$5,189.75

Filed at: COUNTY CLERK PARK CODY, WY 82414		Total	\$557,237.85
This notice was prepared and execut on this, the 28th day of August, 20			
Authorizing Official: ROCHEA I. GARCIA	Title: INSOLVENCY SPEC	26-9	9-6703

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COURT RECORDING DATA 1872 -

INTERNAL REVENUE SERVICE FACSIMILE FEDERAL TAX LIEN DOCUMENT

Recording Number: 20150317-0000537

Lien Recorded : 03/17/2015 - 00:00AM

UCC Number Liber

Page

Area: SMALL BUSINESS/SELF EMPLOYED #6

IRS Serial Number: 146275315

Lien Unit Phone: (800) 829-3903

BANKRUPTCY DOCKET: 17-20934

This Lien Has Been Filed in Accordance with Internal Revenue Regulation 301.6323(f)-1.

Name of Taxpayer: DENNIS M DANZIK

Residence:

PO BOX 28411

LAS VEGAS, NV 89126-2411

With respect to each assessment below, unless notice of lien is refiled by the date in column(e), this notice shall constitute the certificate of release of lien as defined in IRC 6325(a).

Form	Period	ID Number	Assessed	Refile Deadline	Unpaid Balance
(a)	(p)	(c)	(d)	(e)	(f)
1040	12/31/2006	XXX-XX-1786	11/09/2009	12/09/2019	\$9,691.87
1040	12/31/2007	XXX-XX-1786	08/08/2011	09/07/2021	\$74,404.54

Filed at: COUNTY RECORDER CLARK COUNTY LAS VEGAS, NV 89155	Total	\$84,096.41	
This notice was prepared and execute on this, the 03rd day of March, 201.			
Authorizing Official: GRACE SANTACRUZ (800) 829-7650	Title: ACS W&I	15-00-0	0000